Office of the Secretary of State Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040 Limited Liability Company Annual Report Filing Period: February 1 - May 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by Jaw (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00. ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024 1. ID No. 001738095 2. Exact Name of the Limited Liability Company GeoBase Planning Solution's LLC
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2. Exact Name of the Limited Liability Company GeoBase Planning Solution's LLC
3. State of Formation
State: <u>RI</u>
NAICS CODE
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.
<u>541340</u>
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
DRAFTING
5. Principal Office Address
No. and Street: <u>200 WOODLAWN AVENUE</u> UNIT 314
City or Town: NORTH PROVIDENCE State: RI Zip: 02904 Country: US
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:
Contact Name: DANIELLE REZENDES Contact Title: OWNER/CEO No. and Street: 200 WOODLAWN AVE UNIT 314
City or Town: NORTH PROVIDENCE State: RI Zip: 02904 Country: USA

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

DANIELLE REZENDES 200 WOODLAWN AVENUE UNIT 314 NORTH PROVIDENCE , RI 02904

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 29 Day of January, 2024 at 12:32:38 PM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By DANIELLE A REZENDES

Signature of Authorized Person

Form No. 632 Revised 09/07

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